

CITY OF KINDRED

PO Box 158 | Kindred, ND 58051 | 701-428-3115

EMPLOYMENT APPLICATION

Full Name

Date

Address

Phone

Email Address

Position Applying For

Date Available

Desired Salary

Are you a citizen of the United States?

☐ Yes

☐ No

If no, authorized to work in the U.S.? ☐ Yes

Have you ever worked for the City of Kindred?

☐ Yes

☐ No

If yes, when?

Have you ever been convicted of a felony?

☐ Yes

☐ No

If yes, explain:

EDUCATION

Please list highest level of education and dates:

REFERENCES

Please list three professional references (name / relationship)

Phone

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EMPLOYMENT APPLICATION

PREVIOUS EMPLOYMENT

Employer 1

Company

Address

Job Title

Dates

Reason for Leaving

Employer 2

Company

Address

Job Title

Dates

Reason for Leaving

Employer 3

Company

Address

Job Title

Dates

Reason for Leaving

MILITARY SERVICE

Branch

From

To

Rank at Discharge

Type of Discharge

If other than honorable, explain:

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date